



Priorities for Monroe County

March 2005

HEALTH ACTION Celebrates Ten Years of Improving Health in Monroe County

Ten years ago, stakeholders with an interest in improving the health of Monroe County's citizens gathered to discuss how they could work collaboratively toward this goal. The result of this partnership is the strategic initiative, **HEALTH ACTION**. Stakeholders collaborate in a process to assess health status, select priorities for action and plan, implement, and evaluate interventions to address them.

The vision for **HEALTH ACTION** is continuous, measurable improvement in health status for Monroe County. This is implemented by selecting priorities for action from health goals identified in community health report cards¹ in each of five focus areas:

- Maternal and Child Health
- Adolescent Health
- Adult Health
- Older Adult Health
- Environmental Health

Dozens of agencies now work together in **HEALTH ACTION** partnerships to design and carry out interventions to address the priorities for action.² In the pages that follow many of these activities are highlighted as well as outcome data where available.

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¹ These health report cards can be viewed at www.healthaction.org

² A list of the Priorities for Action can be found on page 10



Priorities for Monroe County

HEALTH ACTION Celebrates Local Health Improvements (continued)

Over the last decade, Monroe County has seen improvements in:

- Rates of infant mortality
- Rates of childhood immunization
- Rates of two year old children with health insurance
- Rates of breastfeeding on hospital discharge among WIC participants
- Rates of death from Sudden Infant Death Syndrome
- Hospitalization rates for asthma among children under five
- Hospitalization rates for all ambulatory care sensitive diagnoses among children through age nine, with a reduction in racial disparities
- Rates of confirmed elevated blood lead levels in children
- Rates of smoking among teens
- Rates of fighting and weapon carrying among teens
- Rates of sexual intercourse among teens
- Rates of first alcohol use among teens
- Rates of gonorrhea
- Rates of pneumococcal immunization among older adults
- Rates of mammography



HEALTH ACTION Updates:

Adolescent Health Priority: Reduce Use of Tobacco

Youth Smoking Rates Decline in Monroe County by 50%

The Monroe County youth smoking rate has been cut nearly in half, from a high of nearly 38% in 1997, to 20% in 2003. Smoking rates and other health data were recently reported in the 2003 Monroe County Youth Risk Behavior Survey Report, available on-line at: www.monroecounty.gov.

When **HEALTH ACTION** selected reducing tobacco use as an adolescent health priority, a goal of 20% was set. "At the time, some thought 20% was too ambitious. It is extremely gratifying for our community to have met this goal," said Dr. Andrew Doniger, Monroe County Health Director.

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HEALTH ACTION Updates:

Youth Smoking Rates Decline in Monroe County by 50% (continued)

As with any improvement in health, there are multiple activities and interventions that likely contributed to the marked improved smoking rates among Monroe County youth. These include:

REALITY CHECK

Reality Check is a statewide program designed to empower youth to participate in activities to reduce tobacco use among their peers. Youth from across the state -- under the guidance of adult coaches -- participate in various activities aimed at exposing the deceptive practices of tobacco companies. Children and teenagers constitute the vast majority of all new smokers. For the next five years, Huther-Doyle/Prevention Partners will administer the program in Monroe County. This year, youth will tackle tobacco advertising and promotions in convenience stores.

PRICE

The price of cigarettes has been increased substantially (primarily from tax increases) over the past several years. New York currently has among the highest excise taxes on cigarettes in the nation. Price has repeatedly been shown to be the most effective tool to get fewer people to smoke. Youth -- with generally less disposable income than adults -- are thought to be the most price-sensitive of all consumers. Research has shown that for every 10% increase in the price of cigarettes, there is a corresponding 7% decrease in youth smoking.

TRUTH

TRUTH is a national counter-marketing campaign funded with proceeds from the 1998 national Master Settlement Agreement with major tobacco companies. This hard-hitting campaign produces TV ads that capitalize on teens' propensity to rebel, and they direct that rebellion towards the tobacco industry. When compared with other media campaigns, TRUTH has been highly rated by youth. This on-going campaign is believed to have played a significant role in reduced teen smoking rates.

TOBACCO LIES

Tobacco Lies is a local media campaign sponsored by the Smoking and Health Action Coalition of Monroe County (SHAC). SHAC has chosen to place highly visible signage in many of the most visible public venues in Monroe County that are frequented by youth (Frontier Field, Blue Cross Arena, Total Sports, ESL Center, buses, etc) and to partner with local professional sports teams (Rhinos, Red Wings, Amerks, Rattlers) to use athletes as ambassadors to reach young people. The goal is to get youth to think and decide for themselves whether or not they have been "duped" into smoking. The initiative has proven popular with youths, teachers, and parents.

GOTTAQUIT.COM

GottaQuit.com was an innovative Web-based program designed to help adolescents break their addiction to nicotine. It utilized popular Instant Messaging (IM) technology to connect youth smokers to young adults who have successfully quit smoking. Preliminary evaluation data showed that 94% of Monroe County teens had seen the Gottaquit.com TV ads, 72% of county teen smokers wanted to quit, and 27% of local teen smokers had visited the web site. (Funding for this program was eliminated in 2004).





HEALTH ACTION Updates:

Adolescent Priority: Improving Youth Competencies to Lead Healthy Lives

Community Asset Partner Network

HEALTH ACTION has documented that local youth exhibit high rates of many risk behaviors that put them at risk for disease and disability. Youth frequently engage in risky behavior because of peer pressure, weak decision-making skills and lack of adult role models and support. If youth could build their “competencies” in all these areas, the results would reduce risk in many areas simultaneously. HEALTH ACTION has elected to address these competencies as a means to improving multiple health outcomes.

In 1996, Peter Benson, President of the Search Institute introduced the Rochester Monroe County area to the concept of “building youth assets”. This approach calls for a community to focus on the strengths of all of its youth rather than singling out troubled youth for intervention. In 1998, Monroe County middle schools performed a youth survey that documented the prevalence of youth assets. Shortly thereafter, many county towns, school systems and youth-serving agencies began to work together to build youth assets. Representatives of these local efforts formed the Community Asset Partner Network.

On December 2, 2004, the Community Asset Partner Network and the Rochester Monroe County Youth Bureau hosted the Annual Asset Partner breakfast at the George Eastman’s Dryden Theatre. There was a premier showing of the Community Asset Partner Network video production *Capture Asset Moments in Motion* produced by WB 16 and the local asset partner initiatives.

The Community Asset Partner Network facilitates recognition and celebration events that highlight individuals and groups who have made contributions to youth in our communities. An Annual Family Celebration of Assets at the Seneca Park Zoo is held in October. Since inception, almost 1,300 individuals and groups have received “Outstanding Asset Builders Awards”.

Two countywide Asset Summits have been held, each with an attendance of over 700 youth and adults. The Network has hosted three Annual Asset Breakfast events to showcase local actions and invite new community leaders to the Initiative. Eastman Kodak Company sponsored the third annual asset breakfast called *Capture Asset Moments* that was attended by 270 participants. This year the Network has joined with WB 16 to create a video production reflecting asset building through out the Rochester Monroe County area. For more information, contact the Rochester Monroe County Youth Bureau at 585-274-6823.





HEALTH ACTION Updates:

Maternal/Child Health

Monroe County Board of Health Sets Maternal/Child Health Priorities

The 2003 Maternal Child Health Report Card, released in December 2003, contains updated analyses of health issues affecting mothers and children from birth to age 9. Action for Healthy Children advised county public health staff in the development of the report and agreed to become an ad hoc sub-committee of the Monroe County Board of Health to develop recommendations for priorities for action.

There were eight goals in the report card:

- Improve Birth Outcomes and Infant Health
- Improve Access to Preventive Health Services
- Minimize the Impact of Asthma
- Improve Nutrition and Physical Activity
- Reduce Exposure to Lead
- Reduce Unintentional Injuries
- Improve Social and Emotional Well Being
- Reduce Child Abuse, Neglect and Violence Against Children

Community feedback was sought to determine which goals should be priorities for action for the next several years. Action for Healthy Children members worked with Health Department staff to conduct fifteen maternal/child health forums in the spring of 2004. The forums provided an opportunity for consumers, providers, and advocates to lend their perspective to determining which goals should be priorities for action over the next 4-5 years. The forums included physicians, other health care providers, human service providers, childcare providers, parents and grandparents. A total of 142 people participated.

Based on this input, Action for Healthy Children recommended two priorities for action:

- Improve Social and Emotional Well-being and Reduce Child Abuse
- Improve Nutrition and Increase Physical Activity

The next step in the process is to identify **HEALTH ACTION** partnerships to develop and implement strategies to address these issues. If you are interested in participating in either of these partnerships, please write to Anne Kern at akern@monroecounty.gov.





HEALTH ACTION Updates:

Adult and Older Adult Priority: Reducing Risks for Chronic Disease

The Healthy Living Program

Begun in January 2001, the Healthy Living Program (HLP) is a church and community-based initiative that provides a 12-week, 24-session curriculum of physical activity and health education to the residents of the southwest and northeast quadrants of the city of Rochester. Monroe County provided a grant to launch this program and the Aetna Foundation provided additional funding. Together, these two funders have supported this program for three years. The program has been delivered to over 1,000 adult participants at approximately 50 sites.

The HLP consists of five components:

- **Health Risk screening** to assess for high-risk health conditions and the need for physician consent.
- **Health Risk Assessment.** Prior to the program, each participant completes a comprehensive, 66-question health risk assessment, the results of which are used to generate a personalized health risk profile. Participants use the personal profiles to develop action plans that form the focus of their goal setting for the next 12 weeks.
- **Fitness Assessment.** Individuals are assessed for weight, body mass index, flexibility, cardiovascular endurance, and balance at baseline and at the end of 12 weeks.
- **The Health Promotion Curriculum** delivered by peer health counselors, focuses on development of action steps toward minimizing risk for developing chronic conditions.
- **Physical Activity** is provided through 45-minute group exercise classes that are taught by certified group fitness instructors. The classes are tailored to the fitness levels of the participants, and because many of the participants have chronic conditions and functional limitations, the instructors place a great deal of emphasis on safety.

Demographic Profile: Of the 836 participants for whom 6-month follow up data have been collected, 90% were female; the mean age was 50.7 years and ages ranged from 21 to 94; 92% were African American; 40% had 12 or fewer years of education; 71% had private insurance, 10% had Medicaid, and 10% had Medicare. With respect to chronic disease and risk of disease, 6% had heart disease; 8% were smokers; 17% had diabetes; 43% had hypertension; 29% had high cholesterol; and 90% were overweight or obese.

Outcomes: Because the HLP was designed as an intervention to **HEALTH ACTION** priorities, the outcome measures used to evaluate the success of this program are measures used in the Monroe County Health Department survey process. The measures include: change in duration and intensity of physical activity per week; change in dietary practices; change in readiness to change for physical activity and dietary practices; change in perceived physical and mental health status; and change in fitness performance between baseline and post-intervention follow-up. Results on the two primary outcome measures are reported here.

Change in Dietary Practices: Results from follow up surveys indicate that there were significant improvements in the proportion of participants who consumed 5 or more servings of fruits and vegetables per day (32% at baseline; 47% at 6 months), the proportion who consumed an estimated 30% or less of their calories from fat (17% at baseline; 30% at 6 months), and the proportion who avoided foods high in sodium (67% at baseline; 79% at 6 months).

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HEALTH ACTION Updates:

The Healthy Living Program (*continued*)

Change in Physical Activity. At the end of the 12-week program, 95% of the participants reported engaging in physical activity, 23% reported the Surgeon General's goal for moderate physical activity (i.e., 5x/week for 30 minutes) and 54% meeting the goal of aerobic activity (3x/week for 20 minutes). After 6 months, 80% reported engaging in any physical activity, 18% in moderate activity, and 46% in aerobic activity. While the 6-month follow-up data do not show a decline to pre-HLP rates, the challenge to sustain the gains remains very real.

How is the Healthy Living Program Unique?

- It was developed with broad community input and support from the county and the city, from providers from various health systems, from the two major payers in the region, from a variety of non-profit organizations, and from an ethnically diverse group of community volunteers.
- The HLP builds upon a solid foundation of support within the African American faith community. By targeting churches as primary recruitment sites, word of mouth across congregations has heightened interest in the program and has served to create a waiting list of sites. In addition, the influence of pastors, the faith-based foundation of the program, and the fellowship among participants within sites have become key elements in motivating individuals to register and to actively participate.
- Another unique feature of this program is that the physical activity instructors teach each class for individuals with a variety of fitness and functional levels. When given the choice of classes organized by fitness level or organized by site, participants overwhelmingly chose fellowship.

Local Insurers Address Obesity Epidemic
Excellus Launches “Step-Up Campaign”
Preferred Care Funds YMCA Youth Fitness Program

In 2004, the epidemic of obesity in America began to appear prominently in the national and local media. In response to the problem, both major Rochester health insurers made substantial commitments to funding obesity prevention efforts in Monroe County.

Early in 2004, Preferred Care and the YMCA of Greater Rochester announced a partnership to present the CATCH (Coordinated Approach to Child Health) Program. CATCH is an after-school program designed to provide opportunities for children to be physically active and to learn about health, fitness and nutrition. The program was presented in 13 sites to nearly 1,000 children. CATCH also included the Family Cooks Program designed to address healthy eating as a family issue.

In September 2004, Excellus Blue Cross Blue Shield launched a statewide media campaign and Web site designed to encourage physical activity. The “Step-Up” television commercials describe how ordinary people can make simple modifications in diet and activity in order to be fit and/or lose weight. The commercials celebrate activities like taking the stairs, raking leaves and parking at the far end of the parking lot. The campaign refutes the idea that a regimented diet and marathon racing are necessary for people to improve fitness or burn calories.

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HEALTH ACTION Updates:

Insurers address Obesity (continued)

"Step-up" utilizes a Web site to help people track their progress and learn about opportunities to participate in a physically active life style in our community. The Web site offers a calculator for Body Mass Index and options to participate in fitness competitions. Click on Step-Up at: <http://www.stepup.excellusbcbs.com>.

Excellus is also promoting the Step-Up Program for work sites. Businesses have been signing up to participate in team activities that help the work force improve fitness and diet, resulting in improved employee morale. The Web site also contains materials for health care providers to use in their offices.



Environmental Health Priority: Reducing Hazards in the Home

Coalition to Prevent Lead Poisoning Hosts Summit

On June 10, 2004 the Coalition to Prevent Lead Poisoning held a community summit. The summit was part of a multi-day event designed to strengthen commitments among local agencies, health care organizations, government entities and local businesses to help end lead poisoning in Rochester by the year 2010. The event brought together nearly 500 people to learn about how to end childhood lead poisoning and to commit to taking the action needed.

The Summit was hosted by the Coalition to Prevent Lead Poisoning, and sponsored by the Ad Council, Preferred Care, the University of Rochester Medical Center, and the United Way. Underwriters included Excellus Blue Cross Blue Shield, Finger Lakes Lead Poisoning Prevention Program and Treatment Center, Monroe County Health Department, National Center for Healthy Housing, Roberts Communications, and WXXI-TV.

At a closing session Mayor William Johnson made a commitment on behalf of the City of Rochester to amend city codes to enhance lead hazard reduction activities. Monroe County Executive Maggie Brooks made commitments to enhance health department protocols for remediation of properties with lead hazards and to perform a project designed to reduce hazards in properties in which county public assistance clients reside. County Executive Brooks announced in her January State of the County address that the pilot program would begin in February 2005.

- More information about the Summit and the Lead Free Coalition is available at www.leadSAFEby2010.org.



HEALTH **ACTION** Updates:



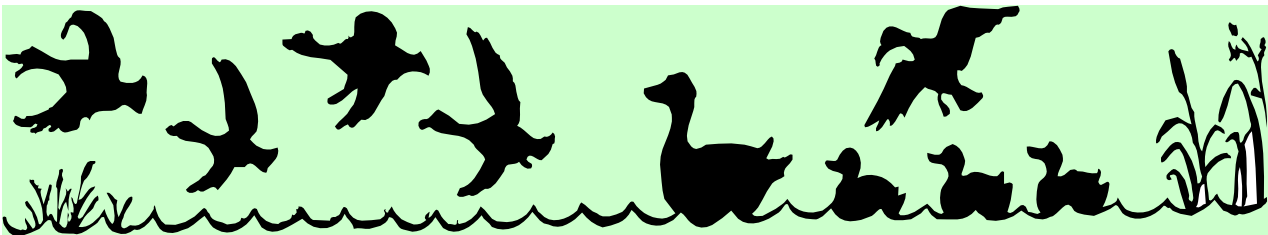
Environmental Health Priority: Improving Water Quality

Monroe County Stormwater Coalition Guides County Distribution of NYS Environmental Protection Grant Funds

The Monroe County Stormwater Coalition was formed in 2000. Formation of the coalition resulted from recognition that many municipalities in Monroe County would be affected by new federal stormwater rules. The Monroe County Department of Public Health was identified as a leader in the state on water quality issues and thus could facilitate collaboration among the municipalities in their compliance. This strategy maximizes resources and reduces duplication of effort. An Inter-Municipal Agreement was drafted and signed by each municipality in 2004.

The new stormwater regulations, effective January 8, 2003, set forth a policy that municipalities that meet certain demographic criteria must have a stormwater implementation plan by 2008. The plan must include six key items: education; public participation; best management practices at construction sites both during and after construction; measures to address illicit discharges; and a pollution prevention program to educate key businesses and municipal facilities that may contribute to stormwater pollution.

In May 2004, the NYS Department of Environmental Conservation awarded over \$300,000 to the Monroe County Department of Public Health to support these efforts.



HEALTH ACTION

STEERING COMMITTEE

Association of Independent Health Centers
Center for Governmental Research
Blue Cross and Blue Shield of the Rochester Area
Finger Lakes Health Systems Agency
Rochester Business Alliance
Lakeside Health System
Monroe County Department of Public Health
Preferred Care
Rochester Area Physicians' Council
Rochester Health Commission
Strong Health
Unity Health Systems
University of Rochester
Via Health



Summary of "Priorities for Action"

Maternal Child Health

- Improving Access to Preventive Services
- Improve Birth Outcomes
- NEW!**
- Improve Nutrition and Increase Physical Activity
- Improve Social and Emotional Well-Being and Reduce Child Abuse

Adolescent Health

- Reduce Use of Tobacco
- Building Youth Competencies to Promote Healthy Lives

Adult Health

- Promote Healthy Behaviors that Reduce the Risk of Chronic Disease
- Promote Use of Preventive Health Services

Older Adult Health

- Promote Use of Preventive Health Services
- Promote Behaviors that Prevent or Delay Complications and Disability from Chronic Disease

Environmental Health

- Improving Water Quality
- Reducing Industrial Pollution
- Reducing Pollution from Small Businesses
- Reducing Hazards in the Home

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